



Genesee County Interagency Council, Inc.
P.O. Box 1619
Batavia, New York 14021

HUMAN SERVICES/SOCIAL WORK PROGRAM \$1000 SCHOLARSHIP

Print or Type all Information

Genesee Community College

STUDENT APPLICATION

DUE DATE: Friday May 7, 2021

NAME _____ TELEPHONE (____) _____
(Last) (First) (MI) (area code)

ADDRESS _____
(Street) (City, State & Zip)

High School Attended: _____ Graduation Date: _____

Genesee Community College Major: _____ Expected Graduation: _____

Cumulative Average: _____ County of Residence: _____

WORK EXPERIENCE

	EMPLOYER	ADDRESS	DATES	POSITIONS
1				
2				
3				

VOLUNTEER EXPERIENCE OR COLLEGE INTERNSHIP

	EMPLOYER	ADDRESS	DATES	POSITIONS
1				
2				
3				

IF LIVING INDEPENDENTLY:

Your Occupation: _____

FINANCIAL INFORMATION

COLLEGE EXPENSES:

1. Give Estimated Total of Annual College Expenses: _____

2. Give Estimated Total of Annual Family Contribution
to your Educational Expenses Next Year: _____

3. List other Financial Aid you will Receive and Amounts of Each: _____

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4. Do you Plan on Working while Attending College? _____ If yes, where? _____
5. What Applications for Financial Aid are you making? _____

EXTRA-CURRICULAR ACTIVITIES

List extra-curricular activities (in school and out) giving type of participation: _____

Talents and Hobbies: _____

List Community Activities: _____

HONORS

List honors and awards (scholastic and otherwise) received while in High School: _____

CAREER GOAL

In what area of Human Services do you hope to specialize? _____

In what way do you feel you have shown potential toward a successful career in the field you have chosen? _____

EDUCATIONAL GOAL

Degree Program? _____ If so, what Program? _____ Where? _____

Do you plan to transfer and continue your education? _____ If so, what Program? _____

Where? _____

*Please attach college/university program acceptance letter. If you don't plan to transfer, what are your career goals after GCC (provide detailed explain in "Additional Information" section)? _____.

RECOMMENDATIONS

Two (2) letters of recommendation are required. You may obtain these from a Guidance Counselor, Teacher, Clergy or other Professional; these must accompany the application. Letters of Recommendation must be no more than one page in length. No personal friend or family recommendations will be accepted. All recommendations must be submitted in sealed envelopes.

ADDITIONAL INFORMATION

Please indicate any additional information you think should be brought to the attention of the Scholarship Committee. Include family, financial or other circumstances that should be considered. State why you feel you are deserving of this award.

Please use separate sheet(s) of paper.

If you receive the scholarship, you are required to attend the Interagency Council Meeting on June 16, 2021 at noon to receive your award. However, if the picnic is cancelled due to COVID, we will acknowledge the awardee in another way and the check will be mailed directly to the individual.

Signature

Date

PLEASE RETURN APPLICATION AND LETTERS OF RECOMMENDATION TO:

***Scholarship Committee
Genesee County Interagency Council, Inc.
C/O Genesee County Office for the Aging Attn: Amy Swanson
2 Bank Street
Batavia, NY 14020***

Postmarked by: Friday May 7, 2021